



Work Order (Bid Form)

WORK ORDER INFORMATION

Work Order Name: WO/12012NW2358/1

Work Order Type: Weatherization

Audit Name: 12012NW2358

CLIENT INFORMATION

Client Name:

Address:

Client ID: 12012NW2358

Alt. Client ID: Dyer Co.

AGENCY INFORMATION

Agency: Northwest Tn. Economic Development Council

Agency Phone: (731) 364-3228

Address: 231 South Wilson St.

Fax: (731) 364-5029

Dresden, TN 38225-1312

Email Address:

Agency Contact: Woods, Max

Work Phone: (731) 286-0332

Cell Phone: (731) 676-1414

Email Address: maxrwoods@gmail.com

Company Name & License Number: _____

Contractor's Signature: _____

COMMENT

Client Name:

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Report Run On: 5/25/2010

DOE Weatherization Assistant

Version 8.5.0

Page 1 of 6

Measures

Measure 1 Replace Front Door

Components

Inspected

Comment Replace existing front door #2. Existing is a hollow core door and in very bad shape. Weathered.

☐

36 x 80 6-panel with viewer R/H

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
10	Unspecified	Misc Material	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		

Field Notes:

Measure 2 Infiltration Redctn

Components

Inspected

Comment Caulk Crown in Den Approx 25 x 12

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Mastic (8) Duct Boots and (1) Return

Door #1 Weatherstrip (Door close to driveway)
Threshold
Caulk

Foam Kitchen and Bath Sink plumbing

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
10	Miscellaneous Supplies	Infiltration Reduction	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		

Field Notes:

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DOE Weatherization Assistant

Version 8.5.0

Page 2 of 6

Measure 3 DWH Pipe Insulation**Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	DHW Pipe Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	DHW Pipe Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

Field Notes:**Measure 4 Attic Ins. R-30****Components A1****Inspected****Comment** Build/Insulate Stairway Box☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	Attic Insulation - Cellulose, Blown - R-30	SqFt	1290					
2	Miscellaneous Supplies	Added Misc Cost	Each	1					
Other Detail									
Measure Sub Total:							Sub Total:		

Field Notes:

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DOE Weatherization Assistant

Version 8.5.0

Page 3 of 6

Measure 5 DWH Tank Insulation**Components****Inspected****Comment** Gas Hot Water Heater☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Hot Water Equipment	DHW Tank Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	DHW Tank Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>
						<input type="text"/>			

Field Notes:**Measure 6 CO Monitor is Needed****Components****Inspected****Comment**☐

#	Material / Labor	Description / Comment	Units	Estimated			Actual		
				Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	CO monitor	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>

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DOE Weatherization Assistant

Version 8.5.0

Page 4 of 6

Measure 7 Fix Any Other Venting Related Problem (Water Heat)**Components****Inspected**

Comment Hot water heater vent pipe ends in attic. Remove single wall pipe and replace with double wall. Vent up from heater and straight up thru roof. Make sure it is vented properly. Install roof jack, storm color and cap. At ceiling also install a thimball. Block around properly and seal with fire foam. Pipe is approx 12' of 3" b-vent

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#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Equipment	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:	<input type="text"/>	

Field Notes:**Measure 8 Install Bathroom Exhaust Fan****Components****Inspected**

Comment Install Bath exhasut and vent thru roof

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#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Bathroom exhaust fan	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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DOE Weatherization Assistant

Version 8.5.0

Page 5 of 6

Measure 9 PressureRelief Piping Needed				Components				Inspected	
Comment									
				Estimated		Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Pressure relief piping	Each	1					
2	Labor	Labor	Hour	1					
Other Detail									
Measure Sub Total:							Sub Total:		
Field Notes:									

Measure 10 Smoke Detector is Needed				Components				Inspected	
Comment									
				Estimated		Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Smoke detector	Each	1					
2	Labor	Labor	Hour	1					
Other Detail									
Measure Sub Total:							Sub Total:		
Field Notes:									
Work Order Grand Total:							Grand Total:		